

VEGETATION MANAGEMENT

LAKE SURVEYS

FISH MANAGEMENT



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PROFESSIONAL CONSULTANTS

FOUNTAINS

AERATION SYSTEMS

Proposal No.: 266242

Created : 01/08/2020

Company ID : 3201

Mr. Chris Spolnik
Town of Munster
1005 Ridge Road
Munster, IN 46321

Cell 219-712-8754
Fax 219-836-8379

Invoices will be mailed to:
Town of Munster
508 Fisher St.
Munster, IN 46321

We hereby submit specifications and costs for a **Custom Vegetation Management Program**.

Program Specifications:

Program to include a biweekly (every other week) inspection of 2 Lakes, 10 ponds, 1 ditch for nuisance aquatic vegetation, with treatment as necessary to maintain acceptable control of nuisance aquatic vegetation during the contract period: April through September, 2020. All materials used in this maintenance program will be registered, or exempt from registration, with the U.S. E.P.A. and State Regulatory Agencies and all applicators will be certified. Material selection will be made with the clients water uses taken into consideration. Some restrictions on use of water may be necessary with weed treatments. Restrictions are listed below in the PRECAUTIONS section of this proposal. Any optional items such as are listed in the OPTIONS section. Nuisance vegetation for terms of this contract includes all submersed aquatic plants and floating/submersed filamentous algae which is visible from the surface or are interfering with the client use of the lake. Emergent vegetation (such as cattails) will be controlled only if requested by the client prior to entering into contract and such control is included in the OPTIONS section below. Control of duckweed and/or watermeal may require application of alternative herbicides and will incur additional charges with approval from client.

Options and/or special terms included in this contract /proposal are as follows:

This proposal covers the following properties: Centennial Park, 1 lake. White Oak Subdivision, 5 ponds. White Oak Woods, 1 pond. West Lakes, 1 lake 4 ponds. Schoon ditch on Fisher St. between Calumet and Columbia. (Schoon ditch is a monthly rip-rap treatment that runs from April through August)

PROGRAM COST: \$21,637.00 (\$21,637.00 plus \$0.00 sales tax)

Nontaxable ☐ Tax Rate 0.000%

Notes and Precautions:

Algae Treatments - No restrictions on water use. **Weed Treatments** - May require suspension of use of treated water for domestic use, swimming, irrigation, and livestock watering. Restrictions vary with the herbicide use. Water use restrictions for your lake will be posted on the day of treatment, unless other notification arrangements have been made.

Terms:

This contract is for the complete program as described in the above specifications and options sections, with material cost prorated over the entire contract period. Payment will be according to the payment option chosen on back. Overdue accounts shall accrue interest at an annual interest rate of 18%. Aquatic Control shall be entitled to collect its attorney fees incurred in the collection of any balance due here under. By signing below, you hereby agree and accept the above prices, specifications, conditions, and terms and authorize Aquatic Control to do the work as specified. Additionally, the undersigned warrants that the undersigned is authorized to sign and accept this proposal on behalf of Town of Munster, and will indemnify and hold Aquatic Control harmless from third party claims for trespass, nuisance or any other challenge to Aquatic Control's authority to perform the work provided for herein.

Authorized Signature: _____

Printed: Steven J. Lee

Acceptance of Proposal

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as stated on the back of this document.

Authorized Signature: _____

Date: _____ Printed: _____

(Fill in Payment Information on back.)

Please sign, date, and return to

Aquatic Control, Inc, 4511 Evans Avenue, Valparaiso, IN 46383

Payment Options (Please check choice)

- Prepayment prior to 4/1/2020 with 3.00% discount of \$649.11 for a total payment of \$20987.89.

☐ *I have enclosed the prepayment with my signed proposal.*

☐ I authorize Aquatic Control to charge my credit/debit card on this specific date _____. My credit/debit card information is listed below:

Card Number _____

Expiration Date _____ Security Code _____ Billing Zip Code _____

Cardholder Signature _____

☐ I authorize Aquatic Control to make a withdrawal on this specific date _____. My bank account information is listed below:

Bank Name _____

Bank City and State _____

Bank Routing Number _____

Bank Account Number _____

Bank Account Type Checking or Savings (circle one)

☐ I will manually mail my timely payment to Aquatic Control.

- Monthly billing starting: 4/1/2020 in 6 monthly installments of \$3606.17.

☐ I authorize Aquatic Control to charge my credit/debit card on the _____ day of each month. My credit/debit card information is listed below:

Card Number _____

Expiration Date _____ Security Code _____ Billing Zip Code _____

Cardholder Signature _____

☐ I authorize Aquatic Control to make a withdrawal on the _____ day of each month. My bank account information is listed below:

Bank Name _____

Bank City and State _____

Bank Routing Number _____

Bank Account Number _____

Bank Account Type Checking or Savings (circle one)

☐ I will manually mail timely payments to Aquatic Control monthly.